Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Mellisa First name Marie	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Chamberlin Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8051	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN		
5.	Where you live	315 W Lucas St Bucyrus, OH 44820 Number, Street, City, State & ZIP Code Crawford County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Par	t 2: Tell the Court About	our Ba	ankruptcy Ca	ase				
7.	The chapter of the Bankruptcy Code you are				f each, see <i>Notice Required by</i> age 1 and check the appropria	y 11 U.S.C. § 342(b) for Individuals Fili ate box.	ing for Bankruptcy	
	choosing to file under	Chapter 7						
		☐ Ch	apter 11					
		☐ Ch	apter 12					
		☐ Ch	apter 13					
8.	How you will pay the fee		about how yo	ou may pay. Typic attorney is submi	ally, if you are paying the fee y	eck with the clerk's office in your local of yourself, you may pay with cash, cashi half, your attorney may pay with a cred	er's check, or money	
					Ilments. If you choose this opt (Official Form 103A).	tion, sign and attach the Application fo	r Individuals to Pay	
		□ I request that my fee be waived (You may request this option only if but is not required to, waive your fee, and may do so only if your incorapplies to your family size and you are unable to pay the fee in install the Application to Have the Chapter 7 Filing Fee Waived (Official Formation)				our income is less than 150% of the o in installments). If you choose this opt	fficial poverty line that ion, you must fill out	
9. Have you filed for bankruptcy within the								
last 8 years?								
			District					
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to I	line 12.				
	residence:	☐ Yes	s. Has yo	our landlord obtain	ned an eviction judgment agair	nst you?		
				No. Go to line 12	2.			
Yes. Fill out <i>Initial Statement About an Eviction Judgment A</i> this bankruptcy petition.				n Judgment Against You (Form 101A) a	and file it as part of			

Deb	otor1 <u>Mellisa Marie</u>	Chamber	lin Case number (if known)	
Par	Report About Any Bu	sinesses	You Own as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of business	
	A sole proprietorship is a			_
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code	
	it to this petition.		Check the appropriate box to describe your business:	
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))	
			☐ None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are o cash-flow § 1116(1)		s debtor or operations,
	For a definition of small	■ No.	I am not filing under Chapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Code.	Bankruptcy
		☐ Yes.	I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankrup I do not choose to proceed under Subchapter V of Chapter 11.	tcy Code, and
		☐ Yes.	I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy choose to proceed under Subchapter V of Chapter 11.	Code, and I
Par	t 4: Report if You Own or	Have Any	Hazardous Property or Any Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed,		Where is the property?	

or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

and 3571.

Executed on

Signature of Debtor 1

/s/ Mellisa Marie Chamberlin

MM / DD / YYYY

September 29, 2021

Mellisa Marie Chamberlin

Signature of Debtor 2

MM / DD / YYYY

Executed on

Debtor 1	Mellisa	Marie	Chamberlin	

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Deborah L Mack	Date	September 29, 2021
Signature of Attorney for Debtor	_	MM / DD / YYYY
Deborah L Mack		
Printed name		
Attorney Deborah L Mack JD/MBA		
Firm name		
53 E Main St		
Lexington, OH 44904		
Number, Street, City, State & ZIP Code		
Contact phone 419.884.4600	Email address	Debbie@OhioFinancial.Lawyer
0067347 ОН		
Bar number & State		

Fill in	n this information to identi	fy your case:					
Debt	or1 Mellisa 1	Marie Chamberlin					
Debt	First Name	Middle Name	•	Last Name			
(Spous	se if, filing) First Name	Middle Name)	Last Name			
Unite	ed States Bankruptcy Court f	or the: NORTHERN D	ISTRICT OF O	HIO			
Case (if know	number					_	ck if this is an nded filing
	icial Form 106Su		ies and C	ertain Statisti	cal Information	1	12/15
inforr	complete and accurate as nation. Fill out all of your soriginal forms, you must fi Summarize Your Ass	chedules first; then cor Il out a new <i>Summary</i> a	mplete the info	rmation on this form	n. If you are filing amer		
							assets of what you own
1.	Schedule A/B: Property (C 1a. Copy line 55, Total real	official Form 106A/B) estate, from Schedule A/B	3			\$	0.00
	1b. Copy line 62, Total pers	onal property, from Sched	dule A/B			\$	22,128.00
	1c. Copy line 63, Total of all	property on Schedule A/	В			\$	22,128.00
Part :	2: Summarize Your Liab	ilities					
							liabilities nt you owe
	Schedule D: Creditors Who 2a. Copy the total you listed				of Part 1 of Schedule D	\$	12,841.00
	Schedule E/F: Creditors What 3a. Copy the total claims from				E/F	\$	0.00
	3b. Copy the total claims fro	om Part 2 (nonpriority uns	secured claims)	from line 6j of Schedu	ıle E/F	\$	39,942.28
					Your total liabilitie	es \$	52,783.28

Part 3: Summarize Your Income and Expenses

Part 4: Answer These Questions for Administrative and Statistical Records

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Best Case Bankruptcy

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$____4,158.94

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	22,835.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	22,835.00

Fill in	this info	ormation to identify your	case and this filing:			
Debto	or 1	Mellisa Marie	Chamberlin			
		First Name	Middle Name	Last Name		
Debto	or 2 e, if filing)	First Name	Middle Name	Last Name		
` .						
United	d States I	Bankruptcy Court for the:	NORTHERN DISTRICT OF OHI	0		
Case	number					☐ Check if this is an
						amended filing
Offi,	cial F	orm 106A/B				
Scr	<u>neau</u>	ıle A/B: Prop	erty			12/15
think it informa Answei	fits best. ation. If m r every qu	Be as complete and accurat ore space is needed, attach estion.	e items. List an asset only once. If a te as possible. If two married people a separate sheet to this form. On the	e are filing together, both a e top of any additional pag	are equally responsible for s	upplying correct
Part 1:	Descri	be Each Residence, Building	, Land, or Other Real Estate You Ov	vn or Have an Interest in		
1. Do y	ou own c	r have any legal or equitable	interest in any residence, building	, land, or similar property?		
■ N	lo. Go to F	Part 2				
_		e is the property?				
	CS. WIICI	e is the property:				
Part 2:	Descri	pe Your Vehicles				
3. Car □ N ■ Y	No	trucks, tractors, sport uti	ility vehicles, motorcycles			
					Do not deduct secured of	claims or exemptions. Put
3.1	Make:	Toyota	Who has an interest in th	e property? Check one	the amount of any secur	ed claims on Schedule D:
	Model:	Camry	Debtor 1 only		Creditors Who Have Cla	nims Secured by Property.
	Year: Approxim	2015 nate mileage: 100, (Debtor 2 only Debtor 1 and Debtor 2	only	Current value of the entire property?	Current value of the portion you own?
		ormation:	At least one of the debt	•	cilino proporty :	portion you out
[KBB Pi	rivate Party Value				
			Check if this is comm	unity property	\$12,009.00	\$12,009.00
			(see instructions)			
	<i>mples:</i> B		Who has an interest in the Debtor 1 only	nowmobiles, motorcycle a	Do not deduct secured of the amount of any secure Creditors Who Have Cla	claims or exemptions. Put ed claims on Schedule D: nims Secured by Property. Current value of the
	Other inf	ormation:	Debtor 1 and Debtor 2	=	entire property?	portion you own?
	Upsid	ormanon: e down and no ing wheel - does n	At least one of the debt Check if this is comm (see instructions)		\$50.00	\$50.00
		, does not run, no				

Debto	or1 <u>Mellisa Ma</u>	arie Chamberlin Case number (if known)
		the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here=>	\$12,059.00
		egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex	usehold goods and famples: Major appliar No Yes. Describe	furnishings nces, furniture, linens, china, kitchenware	·
		Household goods, furniture and appliances	\$1,900.00
Ex		nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music phones, cameras, media players, games TV, Xbox and games, wII and games, computer and	
		accessories, cell phones	\$2,500.00
Ex		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coi ons, memorabilia, collectibles	n, or baseball card collections;
Ex	uipment for sports a kamples: Sports, photo musical instr No Yes. Describe	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	s and kayaks; carpentry tools;
	i rearms Examples: Pistols, rifle: No Yes. Describe	s, shotguns, ammunition, and related equipment	
		gun	\$100.00
	lothes Examples: Everyday cl No Yes. Describe	othes, furs, leather coats, designer wear, shoes, accessories Clothing owned by debtor	\$200.00
E	ewelry Examples: Everyday je No Yes. Describe	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
E	on-farm animals Examples: Dogs, cats, No Yes. Describe	birds, horses	

De	Mellisa Mai	rie Chamberlin	Case number (if known)	
	Any other personal and No	d household items you o	did not already list, including any health aids you did not list	
	☐ Yes. Give specific info	ormation		
15			m Part 3, including any entries for pages you have attached	\$4,700.00
	rt 4: Describe Your Financ			
Do	o you own or have any le	gal or equitable interes	et in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No		r home, in a safe deposit box, and on hand when you file your petition	nc
			Cash in debtor's possession	\$0.00
			accounts; certificates of deposit; shares in credit unions, brokerage hunts with the same institution, list each. Institution name:	ouses, and other similar
		17.1. Checking	Bank Name: Firelands Federal Credit Union Account Number Ending: 527	\$1.00
			Bank Name: Firelands Federal Credit Union	
		17.2. Savings	Account Number Ending: 52781	\$5.00
	Bonds, mutual funds, of Examples: Bond funds, i		s n brokerage firms, money market accounts	
	☐ Yes	Institution or issu	uer name:	
	joint venture	ock and interests in inco	orporated and unincorporated businesses, including an interest	t in an LLC, partnership, and
	■ No □ Yes. Give specific info	ormation about them Name of entity:		
	Negotiable instruments i	include personal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. t transfer to someone by signing or delivering them.	
	Yes. Give specific info	rmation about them Issuer name:		
	Retirement or pension Examples: Interests in IF		k), 403(b), thrift savings accounts, or other pension or profit-sharing p	plans
	Yes. List each account	t separately. Type of account:	Institution name:	
		401(k)	Employer-sponsored, ERISA-qualified retirement plan	\$5,363.00

22. Security deposits and propayments	Deb	otor1 <u>Mellisa Mari</u>	e Chamberlin	Case number (if known)	
23. Anautities (A contract for a periodic payment of money to you, either for life or for a number of years) No	•	Your share of all unused de Examples: Agreements with No	eposits you have made so that you may contin h landlords, prepaid rent, public utilities (electri	c, gas, water), telecommunications compar	ies, or others
No	L	⅃ Yes	institution nar	ne or individual:	
Yes. Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 25 U.S.C. § \$ 530(b)(1), 529A(b), and 529(b)(1). ■ No Yes. Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalities and licensing agreements No Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Money or property owed to you? No Yes. Give specific information about them, including whether you already filed the returns and the tax years 28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Patid due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation. Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Company name: Surrender or refund value:	_		periodic payment of money to you, either for lif	e or for a number of years)	
26 U.S.C. § 530(b)(1), 529A(b), and 529(b)(1). No Yes			r name and description.		
Yes	2	26 U.S.C. §§ 530(b)(1), 529		am, or under a qualified state tuition pro	gram.
■ No □ Yes. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No □ Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No □ Yes. Give specific information about them Money or property owed to you? □ No □ Yes. Give specific information about them, including whether you already filed the returns and the tax years 28. Tax refunds owed to you ■ No □ Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No □ Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No □ Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No ■ Yes. Name the insurance company of each policy and list its value. Company name: □ Round □ Round		• • •	ition name and description. Separately file the	records of any interests.11 U.S.C. § 521(c):	
Yes. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property		•	interests in property (other than anything	listed in line 1), and rights or powers exe	rcisable for your benefit
Examples: internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them 77. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Company name: Beneficiary: Surrender or refund value: Employer-sponsored term life			ation about them		
Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles	_	Examples: Internet domain			
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 11. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Employer-sponsored term life			ation about them		
Yes. Give specific information about them Money or property owed to you?	_	Examples: Building permits		oldings, liquor licenses, professional licens	es
Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value:	_	_	ation about them		
No	Mo	ney or property owed to y	ou?		<pre>portion you own? Do not deduct secured</pre>
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support					
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value:	_	_	ation about them, including whether you alread	y filed the returns and the tax years	
 No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Employer-sponsored term life 	29.				
 ☐ Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Employer-sponsored term life 		_	p sum alimony, spousal support, child support	, maintenance, divorce settlement, property	settlement
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No □ Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No ■ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Employer-sponsored term life	_	_	ation		
31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Employer-sponsored term life		Examples: Unpaid wages, benefits; unpaid	disability insurance payments, disability benefi	ts, sick pay, vacation pay, workers' compe	nsation, Social Security
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No ■ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Employer-sponsored term life		☐ Yes. Give specific inform	ation		
Company name: Beneficiary: Surrender or refund value: Employer-sponsored term life	_	Examples: Health, disability		SA); credit, homeowner's, or renter's insurar	nce
value: Employer-sponsored term life		Yes. Name the insurance			
The land account			Company name:	Beneficiary:	
				child	Unknown

Deb	tor1 Mellisa Marie Chamberlin	Case number (if known)	
•	Any interest in property that is due you from someone who If you are the beneficiary of a living trust, expect proceeds from someone has died. No Yes. Give specific information		vive property because
•	Claims against third parties, whether or not you have filed Examples: Accidents, employment disputes, insurance claims No Yes. Describe each claim		
	Other contingent and unliquidated claims of every nature, No Yes. Describe each claim	including counterclaims of the debtor and rights to	set off claims
	Any financial assets you did not already list No Yes. Give specific information		
36.	Add the dollar value of all of your entries from Part 4, inclined for Part 4. Write that number here		\$5,369.00
Part	5: Describe Any Business-Related Property You Own or Have an	Interest In. List any real estate in Part 1.	
Part	No. Go to Part 6. Yes. Go to line 38. 6: Describe Any Farm- and Commercial Fishing-Related Property If you own or have an interest in farmland, list it in Part 1. Do you own or have any legal or equitable interest in any factors. No. Go to Part 7. Yes. Go to line 47.	y You Own or Have an Interest In.	
	Describe All Property You Own or Have an Interest in That Do you have other property of any kind you did not already Examples: Season tickets, country club membership No Yes. Give specific information		
54.	Add the dollar value of all of your entries from Part 7. Wri	ite that number here	\$0.00
Part	8: List the Totals of Each Part of this Form	L	
55. 56. 57. 58. 59. 60. 61.	Part 1: Total real estate, line 2	\$12,059.00 \$4,700.00 \$5,369.00 \$0.00 \$0.00 + \$0.00	\$0.00
62.	Total personal property. Add lines 56 through 61	\$22,128.00 Copy personal property to	stal \$22,128.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62	2	\$22,128.00

Fill in this inform	Il in this information to identify your case:							
Debtor 1	Mellisa Marie							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO								
Case number								
(if known)						Check if this is an		
						amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Drief description of the preparation and line on Correct value of the Amount of the exemption year claim

Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption.		
2015 Toyota Camry 100,000 miles	\$12,009.00	\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
KBB Private Party Value Line from <i>Schedule A/B</i> : 3.1		☐ 100% of fair market value, up to any applicable statutory limit		
1970 Checkmate unknown Upside down and no steering	\$50.00	\$50.00	Ohio Rev. Code Ann. § 2329.66(A)(18)	
wheel - does not float, does not run, no motor ine from Schedule A/B: 4.1		☐ 100% of fair market value, up to any applicable statutory limit		
Household goods, furniture and appliances	\$1,900.00	\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line from Schedule A/B: 6.1		☐ 100% of fair market value, up to any applicable statutory limit		
TV, Xbox and games, wII and games, computer and	\$2,500.00	\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
accessories, cell phones Line from <i>Schedule A/B</i> : 7.1		☐ 100% of fair market value, up to any applicable statutory limit		
gun Line from Schedule A/B: 10.1	\$100.00	\$350.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
		☐ 100% of fair market value, up to any applicable statutory limit		

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Clothing owned by debtor Line from <i>Schedule A/B</i> : 11.1	\$200.00	\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
		☐ 100% of fair market value, up to any applicable statutory limit	
Cash in debtor's possession Line from Schedule A/B: 16.1	\$0.00	\$0.00	Ohio Rev. Code Ann. \$ 2329.66(A)(3)
		☐ 100% of fair market value, up to any applicable statutory limit	
Checking: Bank Name: Firelands Federal Credit	\$1.00	\$0.00	Ohio Rev. Code Ann. \$ 2329.66(A)(3)
Union Account Number Ending: 527 Line from <i>Schedule A/B</i> : 17.1		☐ 100% of fair market value, up to any applicable statutory limit	, , , , ,
Savings: Bank Name: Firelands Federal Credit Union	\$5.00	\$5.00	Ohio Rev. Code Ann. \$ 2329.66(A)(3)
Account Number Ending: 52781 Line from Schedule A/B: 17.2		100% of fair market value, up to any applicable statutory limit	
401(k): Employer-sponsored, ERISA-qualified retirement	\$5,363.00	Unknown	Ohio Rev. Code Ann. \$ 2329.66(A)(10)(b)
plan Line from <i>Schedule A/B</i> : 21.1		☐ 100% of fair market value, up to any applicable statutory limit	
Employer-sponsored term life insurance	Unknown	Unknown	Ohio Rev. Code Ann. \$9
Beneficiary: child Line from <i>Schedule A/B</i> : 31.1		☐ 100% of fair market value, up to any applicable statutory limit	3917.05

3	Are you claiming a	homostoad	evemption of	more than	\$170 3502

(Sub	iect to ad	liustment on	4/01/22 and ev	erv 3	vears after	that for	cases filed on	or after the o	date of adia	ustment.)

- No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 - ☐ No
 - ☐ Yes

Fill in this informat	ion to identify yo	ur case:				
Debtor 1	Mellisa Mari	e Chamberlin				
-	First Name	Middle Name Last N	lame		•	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last N	lame			
United States Bankr	uptcy Court for the	: NORTHERN DISTRICT OF OHIO				
Case number					_	if this is an ded filing
Official Form						
Schedule D	: Creditors	s Who Have Claims Sec	ured	by Propert	У	12/15
is needed, copy the Ac number (if known). 1. Do any creditors have a No. Check the	Iditional Page, fill it ve claims secured b	this form to the court with your other sched	form. On t	he top of any additio	nal pages, write your na	
		below.				
	ecured Claims			Column A	Column B	Column C
for each claim. If more	than one creditor ha	more than one secured claim, list the creditor se s a particular claim, list the other creditors in Par- ical order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Huntingtor Bank	n National	Describe the property that secures the clai	m:	\$12,841.00	\$12,009.00	\$832.00
Creditor's Name Attn: Bank Po Box 340		2015 Toyota Camry 100,000 miles KBB Private Party Value As of the date you file, the claim is: Check al apply.	II that			
Columbus,	ОН 43234	Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such as mortgag car loan)	ge or secur	red		
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's	s lien)			
☐ At least one of the o	,	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim community debt		Other (including a right to offset)				
Date debt was incurre	Opened 09/18 Last Active ed 7/23/21	Last 4 digits of account number	8518			
	-	Column A on this page. Write that number her	e:	\$12,84	1.00	
If this is the last pag Write that number h		I the dollar value totals from all pages.		\$12,84	1.00	
Part 2: List Others	s to Be Notified fo	or a Debt That You Already Listed				

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fill in this	s information to identify your	case:			
Debtor 1	Mellisa Marie	Chamberlin			
	First Name	Middle Name La:	st Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name La:	st Name		
	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF OHIO	A reality		
Case nun	nber			— 0. 1.74.	
(if known)				☐ Check if this is an amended filing	
Sched Be as company execut Schedule G	olete and accurate as possible. Us ory contracts or unexpired leases 6: Executory Contracts and Unexp	that could result in a claim. Also list exired Leases (Official Form 106G). Do no	ims and Part 2 for creditors ecutory contracts on Scheo t include any creditors with	with NONPRIORITY claims. List the other p dule A/B: Property (Official Form 106A/B) and partially secured claims that are listed in	d on
left. Attach				fill it out, number the entries in the boxes or t. On the top of any additional pages, write y	
Part 1:	List All of Your PRIORITY Ur	secured Claims			
1. Do an	y creditors have priority unsecure	d claims against you?			
■ No	. Go to Part 2.				
☐ Ye	S.				
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
	y creditors have nonpriority unsec				
□ No	. You have nothing to report in this p	art. Submit this form to the court with your	other schedules.		
■ Ye	S.				
unsecu	ured claim, list the creditor separatel ne creditor holds a particular claim, I	y for each claim. For each claim listed, ider	tify what type of claim it is. Do	. If a creditor has more than one nonpriority o not list claims already included in Part 1. If mosecured claims fill out the Continuation Page o	
i dit 2.				Total claim	
4.1 A	vita Health System	Last 4 digits of account	number 8051	\$270	.00
2	onpriority Creditor's Name 69 Portland Way S	When was the debt incu	2020		
N	alion, OH 44833 umber Street City State Zip Code	As of the date you file, t	ne claim is: Check all that ap	ply	
	/ho incurred the debt? Check one.	П.			
_	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed Type of NONPRIORITY u	managed alaims		
	At least one of the debtors and an		insecured claim:		
d	Check if this claim is for a come ebt the claim subject to offset?	munity	of a separation agreement o	r divorce that you did not	
	No		ofit-sharing plans, and other s	similar debts	
	Yes	Other Specify Med	- '		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 8

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48455

Debto	or 1 Mellisa Marie Chamberlin		Case number (if known)	
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	1625	\$6,378.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 06/05 Last Active 06/20	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other Specify Credit Ca	rd	
4.3	Capital One	Last 4 digits of account number	9625	\$952.00
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 06/07 Last	
	Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Active 10/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other Specify Credit Ca	rd	
4.4	CashMax Ohio	Last 4 digits of account number	8051	\$1,500.00
	Nonpriority Creditor's Name 2025 August Dr	When was the debt incurred?	2019-2020	
	Mansfield, OH 44906 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Payday lo	an	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 8

Debto	r1 Mellisa Marie Chamberlin		Case number (if known)	
4.5	CenturyLink	Last 4 digits of account number	1967	\$125.28
	Nonpriority Creditor's Name 2175 Walker Lake Rd	When was the debt incurred?	2019	
	Mansfield, OH 44906 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	• ,	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Electric	DIII	
4.6	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	0138	\$6,684.00
	Attn: Bankruptcy Po Box 3025	When was the debt incurred?	Opened 11/17 Last Active 07/21	
	New Albany, OH 43054			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	ів: Спеск ан тпат арріу	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	Student loans	u Ciaiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	<u> </u>	report as priority claims Debts to pension or profit-sharing	an plane, and other similar debte	
	■ No □ Yes	■ Other. Specify Credit Ca		
	T les	Other. Specify Cleare Co		
1.7	Equifax	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 740241	When was the debt incurred?		
	Atlanta, GA 30374 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,,	oncor an anatappi,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Notice Or		
		- Other, Specify Troctice Of	1	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 8

Debto	r1 Mellisa Marie Chamberlin	Case number (if known)						
4.8	Experian	Last 4 digits of account number		\$0.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 2002 Allen, TX 75013	When was the debt incurred?						
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separations	aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	No	Debts to pension or profit-sharing						
	Yes	Other Specify Notice On	nly					
4.9	Fedloan Nonpriority Creditor's Name	Last 4 digits of account number	0006	\$6,929.00				
	Attn: Bankruptcy Po Box 60610 Harrisburg, PA 17106	When was the debt incurred?	Opened 07/12 Last Active 7/01/21					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims						
	No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	☐ Yes	Other. Specify						
		Education	nal					
4.1 0	Fedloan Nonpriority Creditor's Name	Last 4 digits of account number	0003	\$4,063.00				
	Attn: Bankruptcy Po Box 60610	When was the debt incurred?	Opened 06/12 Last Active 7/01/21					
	Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only							
	Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt		aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts					
	☐ Yes	Other. Specify	221					
		Education	ld1					

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 8

Debtor 1 Mellisa Marie Chamberlin		Case number (if known)						
4.1 1	Fedloan Nonpriority Creditor's Name	Last 4 digits of account number	0005	\$3,184.00				
	Attn: Bankruptcy Po Box 60610 Harrisburg, PA 17106	When was the debt incurred?	Opened 07/12 Last Active 7/01/21					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	Contingent						
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Student loans □ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	☐ Yes	Other. Specify						
		Education	nal					
4.1 2	Fedloan	Last 4 digits of account number	0004	\$2,947.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 60610 Harrisburg, PA 17106	When was the debt incurred?	Opened 06/12 Last Active 7/01/21					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent						
	Debtor 2 only	□ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	☐ Yes	Other. Specify						
		Education	nal					
4.1 3	Fedloan Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$2,234.00				
	Attn: Bankruptcy Po Box 60610	When was the debt incurred?	Opened 10/10 Last Active 7/01/21					
	Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only							
	Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	Type of NONPPIOPITY unsecured claim:						
	Check if this claim is for a community							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin						
	☐ Yes	Other. Specify						
		Education	nal					

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 8

Nonprinting Condition's Name	Debtor 1 Mellisa Marie Chamberlin		Case number (if known)						
Author Street City State 2pt Cose Contingent Contin	11								
Attn: Bankruptory Po Box 6610 Barrisburg, PR 17106 Number Street (R) State 2 pCode Who incurred the debt? Check one. Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Roy Contingent Debtor 2 only Debtor 1 and Debtor 2 only Disposed Others Specify Debtor 1 and Debtor 2 only Disposed Others Specify Debtor 1 and Debtor 2 only Disposed Others Specify Debtor 1 and Debtor 2 only De			Last 4 digits of account number	0002	\$2,086.00				
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Disputed		_	☐ Unliquidated						
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Yes Other. Specity Educational				ration agreement or divorce that you did not					
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Is the claim subject to offset? ■ No □ Debts to pension or profit-sharing plans, and other similar debts									
■ No □ Debts to pension or profit-sharing plans, and other similar debts									
Type		■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
☐ Yes ☐ Other. Specify Collection Attorney Directv		Yes	■ Other. Specify Collection	n Attorney Directv					

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	r1 Mellisa Marie Chamberlin		Case number (if known)					
4.1								
7	Transunion	Last 4 digits of account number		\$0.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 1000	When was the debt incurred?	When was the debt incurred?					
	Crum Lynne, PA 19022 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	No	Debts to pension or profit-sharir	og plane, and other similar debts					
		·						
	Yes	Other. Specify Notice Or	nly					
4.1	US Bank/RMS	Look A distinct of account number	0511	\$707.00				
8	Nonpriority Creditor's Name	Last 4 digits of account number		7707.00				
	Attn: Bankruptcy		Opened 07/06 Last					
	Po Box 5229 Cincinnati, OH 45201	When was the debt incurred?	Active 09/19					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	•	,					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt	☐ Obligations arising out of a sens	aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	□Yes	■ Other Specify Credit Ca	ard					
Dort 2	List Others to De Netified About a De	aht That Var. Already Listed						
Part 3		•	alore de liste d in Boots 4 and 5 Fan annual					
is try have	his page only if you have others to be notified ing to collect from you for a debt you owe to a more than one creditor for any of the debts the ied for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in nat you listed in Parts 1 or 2, list the add	Parts 1 or 2, then list the collection agency	here. Similarly, if you				
	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
	nt Services, Inc		Part 1: Creditors with Priority Unsecured Claim	าร				
	Harry S Truman BLVD t Charles, MO 63301-4047	•	Part 2: Creditors with Nonpriority Unsecured C	Claims				
Jain	C Charles, No 05501 4047	Last 4 digits of account number						
	and Address	On which entry in Part 1 or Part 2 did you						
	nt Services, Inc Harry S Truman BLVD		Part 1: Creditors with Priority Unsecured Claim					
	t Charles, MO 63301-4047		Part 2: Creditors with Nonpriority Unsecured C	laims				
		Last 4 digits of account number						
Name a	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
	ford Co Municipal Court	Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Claim	าร				
	E Mansfield St, Ste 100 rus, OH 44820	•	Part 2: Creditors with Nonpriority Unsecured C	laims				
9	,	Last 4 digits of account number						
Name	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
	ct TV		Part 1: Creditors with Priority Unsecured Claim	าร				
	ox 5007		Part 2: Creditors with Nonpriority Unsecured C					
caro	l Stream, IL 60197	Last 4 digits of account number	,,					

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims
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Best Case Bankruptcy

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Name and Address	On which entry in Part 1 or Part 2	On which entry in Part 1 or Part 2 did you list the original creditor?					
Lyons, Doughty & Veldhuis,	Line $\underline{4 \cdot 2}$ of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
PC 471 E Broad St, 12th Fl Columbus, OH 43215		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Columbus, on 43213	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?					
Meade & Assoc	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
737 Enterprise Drive Lewis Center, OH 43035		■ Part 2: Creditors with Nonpriority Unsecured Claims					
newis center, on 45055	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?					
Radius Global Solutions	Line $\underline{4.5}$ of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
PO Box 390846 Minneapolis, MN 55439		■ Part 2: Creditors with Nonpriority Unsecured Claims					
ritimeaports, riv 33439	Last 4 digits of account number						

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 22,835.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
nomi an z	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 17,107.28
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 39,942.28

Fill in this infor	Fill in this information to identify your case:										
Debtor 1	Mellisa Marie	Chamberlin Middle Name	Last Name								
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name								
	ankruptcy Court for the:	NORTHERN DISTRICT									
Case number (if known)					☐ Check if this is an amended filing						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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Fill in this	s information to identify you	r case:		
Debtor 1	Mellisa Marie	e Chamberlin		
Dobtor 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fill	ing) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRIC	Г ОГ ОНІО	
Case num	nber			
(if known)				☐ Check if this is an amended filing
Officia	ll Form 106H			
	dule H: Your Co	debtors		12/15
	daic III. Tour ook			12/13
your name	and number the entries in the and case number (if known you have any codebtors? (I	n). Answer every question	1.	to this page. On the top of any Additional Pages, write as a codebtor.
■ No □ Yes				
	thin the last 8 years, have yo na, California, Idaho, Louisian			'Y? (Community property states and territories include ington, and Wisconsin.)
		., ,	, , , , , , , , , , , , , , , , , , , ,	,
	. Go to line 3.		a with you at the time?	
⊔ Ye:	s. Did your spouse, former spo	buse, or legal equivalent liv	e with you at the time?	
in line Form	e 2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici 06G). Use Schedule D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
0.4				Colored D. Free
3.1	Name			□ Schedule D, line □ Schedule E/F, line
				☐ Schedule G, line
	Number Street			_
	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street		- 10	_
	City	State	ZIP Code	

Fill	in this information to identify your ca	ase:						
		arie Chamberlin						
	otor 2 puse, if filing)				_			
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF OHIO		_			
_	se number nown)		-				d filing int showing postpetiti as of the following da	
O.	fficial Form 106I					MM / DD/ Y		
S	chedule I: Your Inc	ome				IVIIVI / DD/ T	111	12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. **T1: Describe Employment**	are married and not filing wi	ng jointly, and your ith you, do not inclu	spouse i ide inforr	s living wit nation abo	h you, İnclı ut your spo	ide information abouse. If more space	out your is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing spous	6 e
	If you have more than one job,	Employment status	■ Employed	■ Employed			yed	
	attach a separate page with information about additional	Employment status	□ Not employed	☐ Not employed			nployed	
	employers.	Occupation	Nurse	Nurse				
	Include part-time, seasonal, or self-employed work.	Employer's name	Kindred at H	ome				
	Occupation may include student or homemaker, if it applies.	Employer's address	2881 Village Mansfield, O					
		How long employed the	here? 9 year	rs		_		
Par	Give Details About Mor	nthly Income						
spou	mate monthly income as of the dause unless you are separated. u or your non-filing spouse have mo		-					
	e space, attach a separate sheet to					at p0.00		,
					For D	ebtor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$3,	762.64	\$N/	A
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$N/	<u>A</u>
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$ _3,7	62.64	\$N/A	

Official Form 106I Schedule I: Your Income page 1

							or Debtor 2 or on-filing spouse	
	Copy	y line 4 here	4.	\$_	3,762.64	\$	N/A	
5	List	all navrall deductions:						
5.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	all payroll deductions: Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify: Supplemental Life	5a. 5b. 5c. 5d. 5e. 5f. 5g.	. –	643.09 153.53 3.86 53.97 177.71 0.00 0.00 6.02	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A N/A	
		Supplemental Accident Supplemental Accidental	_	\$_ \$	0.11	\$	N/A N/A	
		Supp Accident		\$_	0.04	\$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,038.53	\$	N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,724.11	\$	N/A	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8c. 8d. 8e.	\$_ \$_ \$_ \$_ \$_	0.00 0.00 89.00 0.00 0.00	\$ \$ \$ + \$	N/A N/A N/A N/A N/A N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	89.00	\$	N/A	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	2	,813.11 + \$		N/A = \$ 2,813.11	
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not cify:	depen		•	•	hedule J. 11. +\$0.00	
12.		the amount in the last column of line 10 to the amount in line 11. The resent that amount on the Summary of Schedules and Statistical Summary of Certales					12. \$2,813.11	
13.	Do y ■	ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	1?				Combined monthly income	

Official Form 106l Schedule I: Your Income page 2

Filli	n this informa	ation to identify y	our case:					
Debt	tor 1	Mellisa Ma	arie Cha	amberlin			k if this is: An amended filing	
Debt	tor 2						A supplement show	wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unite	ed States Bank	ruptcy Court for the	: NORTH	HERN DISTRICT OF OHIC)	_	MM / DD / YYYY	
	e number nown)							
		orm 106J						
Sc	chedule	J: Your	Exper	nses				12/15
info	rmation. If m		eded, atta	. If two married people and the control of the cont				
Part	1: Desci	ribe Your House	ehold					
••	■ No. Go to	o line 2.	in a senar	ate household?				
	□ 103. D 00		ш а осра	ate nousenoid.				
	= ::	-	st file Offici	al Form 106J-2, Expenses	for Separate House	hold of Debt	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			daughter		13	■ Yes
								□ No
								☐ Yes ☐ No
								□ NO □ Yes
					-			□ No
								☐ Yes
3.	expenses o	penses include of people other t d your depende	han _{II}	No Yes				
Dest				h. F				
exp	imate your ex	a date after the	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i			Your exp	enses
,511		,						
4.		or home owners nd any rent for th		ses for your residence. I or lot.	nclude first mortgage	e 4. \$		0.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner'				4b. \$		0.00
		e maintenance, re eowner's associa	•	upkeep expenses dominium dues		4c. \$ 4d. \$		0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

Fill in this infor	mation to identify you	ır case:		
Debtor 1				
Deptor i	Mellisa Mari	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the	NORTHERN DISTR	ICT OF OHIO	
Case number				
(if known)				☐ Check if this is an amended filing
You must file thi obtaining money years, or both. 1	s form whenever you y or property by fraud 8 U.S.C. §§ 152, 1341	file bankruptcy schedu		ormation. ng a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20
	n Below			
Did you pa	y or agree to pay son	neone who is NOT an at	ttorney to help you fill out bankrup	otcy forms?
■ No				
☐ Yes. N	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	ilty of perjury, I declar e true and correct.	e that I have read the s	summary and schedules filed with	this declaration and
X /s/ M	ellisa Marie Ch	amberlin	X	
_	sa Marie Chambe re of Debtor 1	rlin	Signature of Debtor	2
Date 5	September 29, 2	021	Date	
_				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill	in this inforn	nation to identify you	r case:					
Deb	otor 1	Mellisa Marie		LastName				
Deb	otor 2	First Name	Middle Name	Last Name				
	use if, filing)	First Name	Middle Name	Last Name				
Uni	ted States Bar	nkruptcy Court for the:	NORTHERN DISTRICT C	OF OHIO				
	se number					theck if this is an mended filing		
Sta Be a info	s complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup y additional pages, write you			
Par	t 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before				
1.	What is your	current marital statu	ıs?					
	□ Married■ Not mar	ried						
2.	During the la	During the last 3 years, have you lived anywhere other than where you live now?						
	■ No □ Yes. Lis	■ No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.						
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there		
3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)								
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).				
Par	t 2 Explai	n the Sources of You	r Income					
4.	I. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.							
	□ No ■ Yes. Fill	in the details.						
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
bonuse			■ Wages, commissions, bonuses, tips	\$32,986.53	☐ Wages, commissions, bonuses, tips			
			☐ Operating a business		☐ Operating a business			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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Best Case Bankruptcy

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2020)		■ Wages, commissions, bonuses, tips	\$36,368.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	dar year before that: December 31, 2019)	■ Wages, commissions, bonuses, tips	\$30,278.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
and other winnings. List each s	public benefit payments; If you are filing a joint cas	her that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	est; dividends; money collector received together, list it constituted together.	ted from lawsuits; royalties; ar nly once under Debtor 1.	
_ 103.	Till III the details.	Dahtan 4		Dahtan 2	
		Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deduction and exclusions)
	y 1 of current year until filed for bankruptcy:	Child Support	\$801.00		
or last calen anuary 1 to	ndar year: December 31, 2020)	Child Support	\$1,068.00		
	dar year before that: December 31, 2019)	Child Support	\$1,068.00		
art 3: List	r Debtor 1's or Debtor 2	I Made Before You Filed for It's debts primarily consumer Debtor 2 has primarily consu	debts?	s are defined in 11 U.S.C. § 10	01(8) as "incurred by
Are either ☐ No.	During the 90 days before No. Go to line 7 Yes List below paid that or	a personal, family, or househol ore you filed for bankruptcy, die 7. each creditor to whom you pair reditor. Do not include paymen	d you pay any creditor a tota d a total of \$6,825* or more i tts for domestic support oblig	n one or more payments and t	the total amount you
□ No.	During the 90 days before No. Go to line 7 ☐ Yes List below paid that or not include * Subject to adjustment	a personal, family, or househole per you filed for bankruptcy, die 7. each creditor to whom you paireditor. Do not include payment payments to an attorney for the ton 4/01/22 and every 3 years	d you pay any creditor a tota d a total of \$6,825* or more i tts for domestic support oblig his bankruptcy case. s after that for cases filed on	n one or more payments and tations, such as child support a	the total amount you and alimony. Also, do
□ No.	During the 90 days before No. Go to line 7 Yes List below paid that or not include * Subject to adjustment	a personal, family, or househol ore you filed for bankruptcy, die 7. each creditor to whom you paid reditor. Do not include payment payments to an attorney for th	d you pay any creditor a total d a total of \$6,825* or more in the for domestic support obliging bankruptcy case. It is after that for cases filed on the mer debts.	n one or more payments and tations, such as child support a or after the date of adjustmen	the total amount you and alimony. Also, do
□ No.	During the 90 days before No. Go to line 7 yes List below paid that continuous to adjustment Debtor 1 or Debtor 2 of During the 90 days before No. Go to line 7	a personal, family, or househole personal, family, or househole per you filed for bankruptcy, die 7. each creditor to whom you paireditor. Do not include payment payments to an attorney for that on 4/01/22 and every 3 years or both have primarily consulting you filed for bankruptcy, die 7.	d you pay any creditor a total d a total of \$6,825* or more in the for domestic support obligates bankruptcy case. It is after that for cases filed on the mer debts. It is a total d you pay any creditor a total discount in the formula of the form	n one or more payments and the ations, such as child support a conference or after the date of adjustments of \$600 or more?	the total amount you and alimony. Also, do t.
□ No.	During the 90 days before No. Go to line 7 yes List below paid that or not include * Subject to adjustment Debtor 1 or Debtor 2 or During the 90 days before 1 yes List below include pay	a personal, family, or househole per you filed for bankruptcy, die 7. each creditor to whom you paireditor. Do not include payment payments to an attorney for the ton 4/01/22 and every 3 years or both have primarily consumer you filed for bankruptcy, die per you filed for bankruptcy, die yo	d you pay any creditor a total d a total of \$6,825* or more into the form of t	n one or more payments and tations, such as child support a or after the date of adjustmen of \$600 or more?	the total amount you and alimony. Also, do t.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.							
	■ No□ Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment		
3.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.							
	No							
	Yes. List all payments to an insider Insider's Name and Address	Dates of navment	Total amount	A mount you	Passan for th	ia naumant		
	insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credite			
Par	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures						
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details.							
	Case title	Nature of the case	Court or agency		Status of the case			
	Case number Capital One v Mellisa Marie Chamberlin CVF 2100936	Civil	Crawford Co Court 112 E Mansfi Ste 100 Bucyrus, OH	eld St,	■ Pending □ On appea □ Concluded			
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garnis	hed, attached,	seized, or levied? Value of the property		
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your							
	accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.							
	Creditor Name and Address	Describe the action the	creditor took	Date :	action was	Amount		
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?							
	■ No □ Yes							
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Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Pai	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift or cont	_ '''						
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value				
Pai	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details.							
	how the loss occurred							
Pai	t 7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	Attorney Deborah L Mack JD/MBA 53 E Main St Lexington, OH 44904 Debbie@OhioFinancial.Lawyer		08/30/2021	\$1,502.00				
	DECAF 112 Goliad St Fort Worth, TX 76126	certificate of counseling		\$20.00				
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.							
	■ No □ Yes. Fill in the details.							
	Yes. Fill in the details. Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was	Amount of payment				
40	Wishin Overage before your Cl. 14	and did not call to the second second	made					
٦δ.	within 2 years before you filed for bankrup	cy, did you sell, trade, or otherwise transfer any pro	perty to anyone, othe	r tnan property				

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Official Form 107

Best Case Bankruptcy

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

	transferred in the ordinary course of your Include both outright transfers and transfers rinclude gifts and transfers that you have alreated No Yes. Fill in the details.	nade a	as security (such as	the granting of a	ı sec	urity interest or mortgage on your	property). Do not
	Person Who Received Transfer Address		Description and property transfer			Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you						
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-p ■ No			ny property to a	self	f-settled trust or similar device o	of which you are a
	Yes. Fill in the details.						
	Name of trust		Description and	value of the pro	pert	y transferred	Date Transfer was made
Par	List of Certain Financial Accounts, I	nstrun	ments, Safe Depos	it Boxes, and S	toraç	ge Units	
20.	Within 1 year before you filed for bankrup sold, moved, or transferred? Include checking, savings, money market,	or oth	her financial accou	ınts; certificates	s of o		
	houses, pension funds, cooperatives, ass ■ No □ Yes. Fill in the details.	ociatio	ons, and other fina	ncial institution	ıs.		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		st 4 digits of count number	Type of acco instrument	unt	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within to cash, or other valuables?	l year	before you filed fo	r bankruptcy, a	ny s	afe deposit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		De	scribe the contents	Do you still have it?
22.	Have you stored property in a storage unit	or pla	ace other than you	r home within 1	yea	ır before you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, State and ZIP Code)		De	scribe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control	ol for S	Someone Else				
23.	Do you hold or control any property that s for someone.	omeo	ne else owns? Inc	lude any proper	ty yo	ou borrowed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, Code)		De	scribe the property	Value
Par	t 10: Give Details About Environmental In	ıforma	ition				

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 5

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regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Environmental law, if you Name of site Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Address
(Number, Street, City, State and ZIP Code)

Part 12: Sign Below

No

Name

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Date Issued

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Yes. Fill in the details below.

with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Mellisa Marie Chamberlin
Mellisa Marie Chamberlin
Signature of Debtor 1

Date September 29, 2021

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person ______. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

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Debtor 1	mation to identify you Mellisa Marie			
Deploi	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	STRICT OF OHIO	
Case number				
(if known)				☐ Check if this is an
Official Fo	orm 108			amended filing
		on for Indi	viduals Filing Under Chapte	er 7 12/15
you have leas You must file thi whiche on the	ever is earlier, unless form	and the lease has within 30 days afte the court extends t	not expired. r you file your bankruptcy petition or by the date se he time for cause. You must also send copies to the oth are equally responsible for supplying correct in	creditors and lessors you list
Be as complete a		umber (if known).	is needed, attach a separate sheet to this form. On t	the top of any additional pages,
1. For any credit	ors that you listed in		D: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
information be Identify the cr	elow. editor and the property	that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's H	untington Natio	onal Bank	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
	2015 Toyota Ca	amry 100,000	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:	KBB Private Pa	arty Value	☐ Retain the property and [explain]:	_
	our Unexpired Persor			
in the informatio	n below. Do not list r	eal estate leases. U	d in Schedule G: Executory Contracts and Unexpire nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(e lease period has not yet ended.
Describe your u	ınexpired personal pr	operty leases		Will the lease be assumed?
Lessor's name: Description of lea	ased			□ No
Property:				☐ Yes
Lessor's name:	hase			□ No
Description of lea Property:	aseu			☐ Yes
Description of lea	aseu			☐ Yes ☐ No

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Debtor	1 Mellisa Marie Chamberlin	Case number (if known)	
Descri Proper	ption of leased ty:		☐ Yes
	's name: ption of leased		□ No
Proper			☐ Yes
	's name:		□ No
Proper	ption of leased ty:		☐ Yes
	's name: ption of leased		□ No
Proper			☐ Yes
	's name: ption of leased		□ No
Proper			☐ Yes
Part 3:	Sign Below		
	penalty of perjury, I declare that I have indicated my intention about that is subject to an unexpired lease.	out any property of my estate that sec	cures a debt and any personal
		x	
	ellisa Marie Chamberlin ignature of Debtor 1	Signature of Debtor 2	
D	ate September 29, 2021	Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Filli	n this information to identify your case:			s directed in this form and in F	-orm
Deb	tor1 Mellisa Marie Chamberlin		22A-1Supp:		
1 .	tor 2		■ 1. There is no p	resumption of abuse	
Unit	ed States Bankruptcy Court for the: Northern District of	f Ohio	applies will b	on to determine if a presumption e made under <i>Chapter 7 Mea</i>	
	e number		,	Official Form 122A-2).	
(if kno	own)			est does not apply now becau tary service but it could apply	
			☐ Check if this is	s an amended filing	
Off	ficial Form 122A - 1				
Ch	apter 7 Statement of Your Cur	rent Monthly Inc	come		04/20
attacl	complete and accurate as possible. If two married people as has esparate sheet to this form. Include the line number to wonumber (if known). If you believe that you are exempted from fying military service, complete and file Statement of Exempted: 1: Calculate Your Current Monthly Income	hich the additional information n a presumption of abuse beca	applies. On the top o	of any additional pages, write yo primarily consumer debts or be	our name and cause of
1.	What is your marital and filing status? Check one on	ly.			
	■ Not married. Fill out Column A, lines 2-11.				
	☐ Married and your spouse is filing with you. Fill ou	t both Columns A and B, lines	s 2-11.		
	\square Married and your spouse is NOT filing with you.	You and your spouse are:			
	☐ Living in the same household and are not lega	Ily separated. Fill out both Co	olumns A and B, line	es 2-11.	
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading	egally separated under nonba	inkruptcy law that ap	plies or that you and your spo	
10 th	ill in the average monthly income that you received from all sold (10A). For example, if you are filing on September 15, the 6-mere 6 months, add the income for all 6 months and divide the total bouses own the same rental property, put the income from that property.	onth period would be March 1 thro by 6. Fill in the result. Do not inclu	ough August 31. If the aude any income amour	amount of your monthly income va it more than once. For example, if	aried during both
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and commissions (before all	4, 069.94	4 \$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payments from a spouse if	\$0.00	<u> </u>	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Include regular contributions, your dependents, parents,)	
5.	Net income from operating a business, profession,				
		Debtor 1			
	Gross receipts (before all deductions)	\$ 0.00			
	Ordinary and necessary operating expenses	-\$ 0.00 Conv. horo	. c 0.00) (
	Net monthly income from a business, profession, or farm	m \$0.00 Copy here -:	>\$0.00	<u> </u>	
6.	Net income from rental and other real property	Debtor 1			
	Cross resoints (hefers all deductions)	\$ 0.00			
	Gross receipts (before all deductions)	-\$ 0.00 -\$			
	Ordinary and necessary operating expenses	\$ 0.00 Copy here -:	>\$ 0.00) \$	

Official Form 122A-1

7. Interest, dividends, and royalties

Chapter 7 Statement of Your Current Monthly Income Software Copyright (c) 1996-2021 Best Case, LLC - www.bestcase.com

0.00

page 1

				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here: For you							
	For you S For your spouse S	0.00	<u>U</u>					
۵	Pension or retirement income. Do not include any ar		_					
9.	benefit under the Social Security Act. Also, except as a not include any compensation, pension, pay, annuity, united States Government in connection with a disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter 61.	stated in the next sentence or allowance paid by the ity, combat-related injury ces. If you received any repay only to the extent the u would otherwise be entered.	or retired at it	\$	0.00	\$		
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social under the Federal law relating to the national emergen under the National Emergencies Act (50 U.S.C. 1601 coronavirus disease 2019 (COVID-19); payments receirime, a crime against humanity, or international or dor compensation pension, pay, annuity, or allowance pai Government in connection with a disability, combat-rel death of a member of the uniformed services. If necesseparate page and put the total below.	Security Act; payments n cy declared by the Presidet seq.) with respect to the sived as a victim of a war mestic terrorism; or d by the United States ated injury or disability, o	nade dent e					
	·		_	\$	0.00	\$		
			_	\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add li each column. Then add the total for Column A to the to		\$_4,	158.94	+ \$		5 4,158.94 Total current monthly	
Part	2: Determine Whether the Means Test Applies	to You					income	
12.	Calculate your current monthly income for the year	r. Follow these steps:						
	12a. Copy your total current monthly income from line			Сору	line 11 h	ere=>	\$ 4,158.94	
	,							
	Multiply by 12 (the number of months in a year)						x 12	
	12b. The result is your annual income for this part of the	ne form				12b.	\$ 49,907.28	
12	Calculate the median family income that applies to	vou Follow these steps						_
13.	•		•					
	Fill in the state in which you live.	ОН						
	Fill in the number of people in your household.	2						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link spe	ecified in	n the separa	te instructi	13. ions	\$ 67,059.00	
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. C	On the top of page 1, che	ck box	1, There is n	o presum _i	otion of abuse	9.	
	Go to Part 3. Do NOT fill out or file Officia 14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A–2.	l Form 122A-2.						
Part								
	By signing here, I declare under penalty of perjury	y that the information on	this sta	tement and i	n any atta	chments is tru	ue and correct.	
	By signing here, I declare under penalty of perjury	y that the information on	this sta	tement and i	n any atta	cnments is tru	ue and correct.	
	By signing here, I declare under penalty of perjury X /s/ Mellisa Marie Chamberlin Mellisa Marie Chamberlin	y that the information on	this sta	tement and i	n any atta	cnments is tru	ue and correct.	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 2

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Debtor 1	Mellisa Marie	Chamberlin	Case number (if known)	

Signature of Debtor 1

Date September 29, 2021

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 3
Best Case Bankruptcy

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Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 03/01/2021 to 08/31/2021.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer : Kindred at Home

Constant income of \$4,069.94 per month.*

Line 4 - Child support income (including foster care and disability)

Source of Income: Child Support

Income by Month:

	Average per month:	\$89.00
Last Month:	08/2021	\$89.00
2 Months Ago:	07/2021	\$89.00
3 Months Ago:	06/2021	\$89.00
4 Months Ago:	05/2021	\$89.00
5 Months Ago:	04/2021	\$89.00
6 Months Ago:	03/2021	\$89.00

*Paycheck Details:

Kindred at Home

Date	Earnings	Overtime	Taxes	Other	Net Check
2021-03-05	1,425.23	0.00	218.90	149.12	1,057.21
2021-03-19	2,036.52	0.00	365.60	167.52	1,503.40
2021-04-02	1,426.24	0.00	215.22	148.66	1,062.36
2021-04-16	1,867.74	0.00	319.26	161.78	1,386.70
2021-04-30	1,611.76	0.00	266.36	185.01	1,160.39
2021-05-14	1,825.43	0.00	304.86	193.20	1,327.37
2021-05-28	1,649.97	0.00	271.31	186.06	1,192.60
2021-06-11	2,007.22	0.00	346.06	201.90	1,459.26
2021-06-25	1,416.89	0.00	225.52	176.32	1,015.05
2021-07-09	1,942.36	0.00	338.49	198.59	1,405.28
2021-07-23	1,638.57	0.00	284.93	187.44	1,166.20
2021-08-06	1,845.98	0.00	327.46	196.30	1,322.22
2021-08-20	1,673.28	0.00	297.88	190.13	1,185.27
2021-08-27	2,052.43	0.00	375.03	206.06	1,471.34
2021-09-10	1,629.43	0.00	295.30	189.59	1,144.54
Totals:	26,049.05	0.00	4,452.18	2,737.68	18,859.19
i otais.	20,019.00	0.00	1, 102.10	2,	10,000.10

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
<u>+</u> \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Northern District of Ohio

In re	Mellisa Marie Chamberlin		Case I	No	
		Debtor(s)	Chapt	er <u>7</u>	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR	DEBTOR(S)	
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	, or agreed to be	paid to me, for services r	
	For legal services, I have agreed to accept		\$	1,502.00	
	Prior to the filing of this statement I have received			1,502.00	
	Balance Due		\$	0.00	
2. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	I have not agreed to share the above-disclosed compo	ensation with any other persor	unless they are r	nembers and associates of	of my law firm.
[☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				law firm. A
5. I	n return for the above-disclosed fee, I have agreed to re	nder legal service for all aspec	ets of the bankrup	tcy case, including:	
b c	Analysis of the debtor's financial situation, and rende Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credito [Other provisions as needed] Representation of the debtors in avoidances; preparation and fili	ement of affairs and plan which ors and confirmation hearing, and any dischargeabilit	h may be required and any adjourned by actions;	d; hearings thereof;	
6. E	y agreement with the debtor(s), the above-disclosed fee Representation of the debtors in more than two judicial lien avoi agreements as needed; relief fro negotiations with secured credit filing of motions pursuant to 11	any dischargeabilit dances; preparation om stay actions or ar ors to reduce surety	ty actions; and filing of and filing of a diversity to market	of beyond two rea ersary proceeding value; preparatio	ffirmation ; on and
		CERTIFICATION			
	certify that the foregoing is a complete statement of any nkruptcy proceeding.	agreement or arrangement fo	or payment to me	for representation of the	debtor(s) in
S€	ptember 29, 2021	/s/ Deborah I	Mack		
Do	ite	Deborah L Mac			
		Signature of Attorn Attorney Debo		JD/MBA	
		53 E Main St		72711211	
		Lexington, OH 419.884.4600		3620	
		Debbie@OhioFi			
I		Name of law firm			

United States Bankruptcy Court Northern District of Ohio

Case No.

		Debtor(s)	Chapter	7
	VERIFICAT	ION OF CREDITOR M	ATRIX	
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.				
Date:	September 29, 2021	/s/ Mellisa Marie Chamberl Mellisa Marie Chamberlin	in	

Signature of Debtor

In re Mellisa Marie Chamberlin

Avita Health System 269 Portland Way S Galion, OH 44833

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

CashMax Ohio 2025 August Dr Mansfield, OH 44906

CenturyLink 2175 Walker Lake Rd Mansfield, OH 44906

Client Services, Inc 3451 Harry S Truman BLVD Saint Charles, MO 63301-4047

Crawford Co Municipal Court 112 E Mansfield St, Ste 100 Bucyrus, OH 44820

Direct TV PO Box 5007 Carol Stream, IL 60197

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Equifax Attn: Bankruptcy Dept. P.O. Box 740241 Atlanta, GA 30374

Experian
Attn: Bankruptcy Dept.
P.O. Box 2002
Allen, TX 75013

Fedloan Attn: Bankruptcy Po Box 60610 Harrisburg, PA 17106

Huntington National Bank Attn: Bankruptcy Po Box 340996 Columbus, OH 43234

Lyons, Doughty & Veldhuis, PC 471 E Broad St, 12th Fl Columbus, OH 43215

Meade & Assoc 737 Enterprise Drive Lewis Center, OH 43035

Radius Global Solutions PO Box 390846 Minneapolis, MN 55439

Receivables Performance Mgmt Attn: Bankruptcy Po Box 1548 Lynnwood, WA 98046

Transunion Attn: Bankruptcy Dept. P.O. Box 1000 Crum Lynne, PA 19022

US Bank/RMS Attn: Bankruptcy Po Box 5229 Cincinnati, OH 45201